

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PA	70385	
O.I.P.E. CLASSIFIER			12-18-98
FORMALITY REVIEW		60500	

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 -+ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date											
Final	Original	1	2	3	4	5	6	7	8	9	10	11
1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
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3	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
4	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
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Claim	Date											
Final	Original	1	2	3	4	5	6	7	8	9	10	11
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Claim	Date											
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)